



## PARTICIPATION/DONATION FORM

### EQUIPMENT ROAD-E-O & TOUCH-A-TRUCK

COMPANY NAME: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

CONTACT PHONE NUMBER: \_\_\_\_\_

DESCRIPTION OF COMPANY PARTICIPATION/DONATION PLAN:

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**RETURN COMPLETED FORM WITH A COPY OF YOUR INSURANCE  
CERTIFICATE BY **Monday, May 3, 2013****

**Release & Indemnity Statement:**

I, the undersigned, am a member of the general public. In consideration of being allowed to attend and participate in the City of Franklin Equipment Road-e-o and/or Touch-a-Truck event, I, the undersigned, do hereby agree to release, acquit, forever discharge, and to hold the City of Franklin, the Mayor, Aldermen, officials and its employees immune and harmless from any liability, for either bodily or personal injury, including death, or property damage, known or unknown, foreseen or unforeseen, which may be incurred arising out of or relating to my participation in all City sponsored Equipment Road-e-o and Touch-a-Truck events and activities.

\_\_\_\_\_  
Contact Signature

\_\_\_\_\_  
Date

**Return form to:**

**City of Franklin, Parks Department  
ATTN: Lisa Clayton  
PO Box 305  
Franklin, TN 37065  
615.794.2103 (office)**